

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
FOR USE WITH FORM PTO-875

ITEM NO. 09/830620 FILING DATE

APPLICANT(S)

CLAIMS

| AS FILED | AFTER 1st AMENDMENT | | AFTER 2nd AMENDMENT | |
|--------------|---------------------|------|---------------------|------|
| | IND. | DEP. | IND. | DEP. |
| 1 | | 1 | | |
| 2 | 1 | | 1 | |
| 3 | 1 | | 1 | |
| 4 | 1 | | 1 | |
| 5 | 1 | | 1 | |
| 6 | 1 | | 1 | |
| 7 | 1 | | 1 | |
| 8 | 1 | | 1 | |
| 9 | 1 | | 1 | |
| 10 | 1 | | 1 | |
| 11 | 2 | | 2 | |
| 12 | 1 | | 2 | |
| 13 | 2 | | 2 | |
| 14 | 2 | | 2 | |
| 15 | 2 | | 2 | |
| 16 | 1 | | 2 | |
| 17 | 2 | | 2 | |
| 18 | 2 | | 2 | |
| 19 | 2 | | 2 | |
| 20 | 1 | | 2 | |
| 21 | 2 | | 2 | |
| 22 | 2 | | 2 | |
| 23 | 2 | | 2 | |
| 24 | 2 | | 2 | |
| 25 | 2 | | 2 | |
| 26 | 2 | | 1 | |
| 27 | 2 | | 1 | |
| 28 | 2 | | 1 | |
| 29 | 2 | | 1 | |
| 30 | 2 | | 1 | |
| 31 | 1 | | 1 | |
| 32 | 1 | | 1 | |
| 33 | 1 | | 1 | |
| 34 | 2 | | 2 | |
| 35 | 2 | | 2 | |
| 36 | 2 | | 2 | |
| 37 | 2 | | 2 | |
| 38 | 2 | | 2 | |
| 39 | 2 | | 2 | |
| 40 | 2 | | 2 | |
| 41 | 3 | | 3 | |
| 42 | 3 | | 3 | |
| 43 | 3 | | 3 | |
| 44 | 1 | | | |
| 45 | 1 | | | |
| 46 | 2 | | | |
| 47 | 1 | | | |
| 48 | 2 | | | |
| 49 | 2 | | | |
| 50 | 1 | | | |
| TOTAL ID. | | 3 | | |
| TOTAL DEP. | | 66 | | |
| TOTAL CLAIMS | 70 | 109 | | |

| IND. | DEP. | IND. | DEP. | IND. | DEP. |
|--------------|------|------|------|------|------|
| 61 | 1 | | | | |
| 62 | 1 | | | | |
| 63 | 1 | | | | |
| 64 | 3 | | | | |
| 65 | 3 | | | | |
| 66 | 3 | | | | |
| 67 | 3 | | | | |
| 68 | 3 | | | | |
| 69 | 3 | | | | |
| 70 | 3 | | | | |
| 71 | 1 | | | | |
| 72 | 2 | | | | |
| 73 | 2 | | | | |
| 74 | 2 | | | | |
| 75 | 2 | | | | |
| 76 | 1 | | | | |
| 77 | 1 | | | | |
| 78 | 2 | | | | |
| 79 | 2 | | | | |
| 80 | 2 | | | | |
| 81 | 2 | | | | |
| 82 | 2 | | | | |
| 83 | 1 | | | | |
| 84 | 1 | | | | |
| 85 | 2 | | | | |
| 86 | 2 | | | | |
| 87 | | | | | |
| 88 | | | | | |
| 89 | | | | | |
| 90 | | | | | |
| 91 | | | | | |
| 92 | | | | | |
| 93 | | | | | |
| 94 | | | | | |
| 95 | | | | | |
| 96 | | | | | |
| 97 | | | | | |
| 98 | | | | | |
| 99 | | | | | |
| 100 | | | | | |
| TOTAL IND. | X | | | | |
| TOTAL DEP. | 47 | | | | |
| TOTAL CLAIMS | 575 | | | | |

TO-1360 (3-78)

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS U.S. DEPARTMENT OF COMMERCE
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